PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

C44920030013751

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19				Γ	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			1 minus 20=		* 6			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 m	inus 3 =	* C			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				f	+140=		OR	+280=	
* If the difference in column 1 is less				ss than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	750
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	(Column 2)			(Column 3)		SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	• •
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM			+140=		OR	+280=	
	(Column 1) (Column 2) (Column 3)									OR	TOTAL ADDIT. FEE	
											ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	Minus *** TIPLE DEPENDENT		=	1	X42=		OR	X84=	
_	TINOTPHEOL	IVIATION OF W	OLTIFICE DE	PENDEN	CLAIN		, [+140=		OR	+280=	
							Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X42=			X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		T CLAIN		┇┝	7(12-		OR	7.01=	
	If the entry in eath	mn 1 is loss than t	ho ontre la	luma O	o "O" !	aluma 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		imber Previously F nber Previously Pa							propriat box	k in co		